



Docket No. 50325-0598 (Seq.No. 4395)

PATENT

TFW
2134

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Mahesh S. Maddury, et al.

Serial No.: 10/040,050

Filed: October 25, 2001

For: METHOD AND APPARATUS FOR
CALCULATING A MULTIPLICATIVE
INVERSE OF AN ELEMENT OF A PRIME
FIELD

Confirmation No.: 1826
Group Art Unit: 2134
Examiner: William S. Powers

REPLY TO OFFICE ACTION

Hon. Commissioner for Patents
Mail Stop AMENDMENT
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is in response to the Office Action mailed **August 10, 2005**, the shortened statutory period for which runs until **November 10, 2005**.

INTRODUCTORY COMMENTS

Specification Amendments, Drawing Amendments, Claim Amendments, and Remarks are presented on separate sheets as indicated below:

- Amendments to the Specification begin at page 2.
- Amendments to the Claims begin at page 3.
- Amendments to the Drawings begin at page 9.
- Remarks begin at page 10.
- An Appendix including amended drawing figures is attached after page 24.

The Applicant respectfully requests reconsideration of the application in light of the remarks after entry of the amendments.



FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 AND 1.28

TOTAL AMOUNT OF PAYMENT **(\$)** **600.00**

Complete if Known

Application Number	10/040,050
Filing Date	October 25, 2001
First Named Inventor	MAHESH S. MADDURY
Examiner Name	WILLIAM S. POWERS
Group/Art Unit	2134

Attorney Docket No. **50325-0598**

METHOD OF PAYMENT (check one)

1. Throughout the pendency of this application, please charge any additional fees, including any required extension of time fees, and credit all overpayments to deposit account 50-1302. A duplicate of this sheet is enclosed.

Deposit Account Number **50-1302**

Deposit Account Name **Hickman Palermo Truong & Becker, LLP**

2. Payment Enclosed:

Check Money Order Other

3. Applicant(s) is entitled to small entity status.

See 37 CFR 1.27.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
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1051	130	2051	65	Surcharge – late filing fee or oath	
1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet.	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	

1401 500 2401 250 Notice of Appeal

1402 500 2402 250 Filing a brief in support of an appeal

1452 500 2452 250 Petition to revive – unavoidable

1453 1,500 2453 750 Petition to revive – unintentional

1501 1,400 2501 700 Utility issue fee (or reissue)

1502 800 2502 400 Design issue fee

1504 300 2504 300 Publication Fee

1462 400 1462 400 Petitions Director not specifically provided for Group I

1463 200 1463 200 Petitions Director not specifically provided for Group II

1464 130 1464 130 Petitions Director not specifically provided for Group III

1806 180 1806 180 Submission of information Disclosure Stmt

8021 40 8021 40 Recording each patent assignment per property (times number of properties)

1809 790 2809 395 Filing a submission after final rejection (37 CFR § 1.129(a))

1810 790 2810 395 For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify) _____

Other fee (specify) _____

2. EXTRA CLAIM FEES

	Highest Paid Claims	Extra Claims	Fee from Below	Fee Paid
Total Claims	16	-20 =	0 X 50.00	= 0.00
Independent Claims	9	- 6 =	3 X 200.00	= 600.00
Multiple Dependent				

**or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description
1202	50	2202	25 Claims in excess of 20
1201	200	2201	100 Independent claims in excess of 3
1203	360	2203	180 Multiple dependent claim, if not paid
1204	200	2204	100 **Reissue independent claims over original patent
1205	50	2205	25 **Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **(\$)** **600.00**

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$) **0.00**

SUBMITTED BY

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Telephone **(408) 414-1080**

Signature

Date **November 10, 2005**

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Amend, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. SEQ.NO. 4395